

## **BLACK INFANT HEALTH (BIH) PROGRAM**

### **Background**

California started to meet the challenge of improving the health of African-American women, infants, and children in 1989, with the passage of Senate Bill (SB) 165, Budget Act of 1989 (Alquist, Chapter 93, Statutes of 1988). SB 165 appropriated \$1.4 million for new, innovative projects to reduce the rate of Black infant mortality in California and for the formation of a leadership Committee. The State Department of Health Services formed the Black Infant Health (BIH) Leadership Committee to provide advice on state-of-the art strategies for reducing African-American morbidity and mortality, as well as suggestions for funding innovative projects. Initial funding was provided to four innovative demonstration projects. Through a subsequent Initiative, additional funding was made available to the 16 health jurisdictions (cities and counties) where over 90 percent of California's African-American live births and infant deaths occur.

The purpose of the BIH Program is to eliminate the disproportionate African-American infant mortality rate and to improve related health status indicators in the African-American communities of California. The BIH Program is designed to identify "at risk" pregnant and parenting African-American women, to provide them assistance that will aid in their accessing and maintaining appropriate health care for themselves and their infant through their first year of life, and to receive other family supportive services (e.g. child care, job training, assistance with food and housing, transportation, etc.).

The BIH Program is currently implemented in 17 health jurisdictions where 93 percent of African-American live births and deaths occur. It is within these areas that present and future efforts to reduce African-American infant mortality are directed with the expectancy of improving outcomes.

The BIH Scope of Work is based upon the following Healthy People 2010 objectives:

- Increase to at least 90 percent, the proportion of all pregnant women who receive continuous prenatal care starting in the first trimester of pregnancy.
- Reduce low birth weight (LBW) babies to no more than 5 percent of all live births.
- Reduce the African-American infant mortality rate to no more than 11 per 1,000 live births.
- Reduce the African-American maternal mortality rate to no more than 5 per 100,000 live births.

An additional BIH objective is the implementation of the prematurity prevention guidelines.